Division of Corporations Public Access System

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Division of Corporations

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Account Name : FASTKIT CORPORATE OUTFITS

Account Number: 071001002335

: (305)599-0839

Fax Number

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FLORIDA/FOREIGN LIMITED LIABILITY CO.

GRANTEPUY, LLC

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Certificate of Status	<i>s</i> 0	
Certified Copy	1	
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Electronic Filing Menu

Corporate Filing Menu

The name of the Limit GRANTEPUY, (Must end with the words "L	rrc		pany" or abbreviation "LL			G AM 8: 35 T OF STATE EE, FLORIDA
ARTICLE II- Address The mailing address a Company is:	-	of the princip	al office of the Limit	ed Liabilit	y	
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Principal Office Addre	-	• •	Mailing Address	<u>.</u>		· · · · · · · · · · · · · · · · · · ·
10556 NW 26 S			SAME		· .	- ,.•
DORAL FL 3317	2	i		 -	<u></u>	<u>.</u>
						
ARTICI E III. Manage	or(s) or Managing	Mombor(s)	· · · · · · · · · · · · · · · · · · ·	· .		
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The name and addres Title MGRM	Name and A JOSE 1055 DORAL LISS 1055	r of Managing Address: VARGAS 6 NW 26 ST L FL 33172 SETTE AVIL	C D101	ws:		
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The name and addres Title MGRM	Name and A JOSE 1055 DORAL LISS 1055	r of Managing Address: VARGAS 6 NW 26 ST L FL 33172 SETTE AVIL	C D101	ws:		

ARTICLE IV- Registered Agent, Registered Office & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Joseph F. Cabanas ~ Cabanas & Associates	
Name	
10520 NW 26th Street- Suite C201	_
Florida Street Address	
Dorel, FL 33172	_
City, State, and Zip	•

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificated, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statures relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (Required)

ARTICLE V: Effective date, if other than the date of filing:

SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution that the facts stated herein are true)

Joseph F. Cabanas

Type or printed name of signee.